

## General Assembly

## Substitute Bill No. 5536

February Session, 2008

*	HB05536LABAPP031308	×

## AN ACT ESTABLISHING THE CONNECTICUT HEALTHCARE PARTNERSHIP.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (NEW) (Effective from passage) (a) As used in sections 1 to
- 2 8, inclusive, of this act:
- 3 (1) "Labor organization" means any organization that exists and is
- 4 constituted for the purpose, in whole or in part, of collective
- 5 bargaining or of dealing with employers concerning grievances, terms
- 6 or conditions of employment, or other mutual aid or protection.
- 7 (2) "Nonstate public employer" means a municipality or other
- 8 political subdivision of the state, including an employee of a board of
- 9 education or any employee of a quasi-public agency or public library.
- 10 (3) "Nonstate public employee" means any regular employee or
- 11 elected officer of a nonstate public employer.
- 12 (4) "Municipal-related employer" means any property management
- 13 business, food service business or school transportation business that
- is a party to a contract with a nonstate public employer.
- 15 (5) "Municipal-related employee" means any employee of a
- municipal-related employer performing services in connection with a
- 17 nonpublic contract.
- 18 (6) "Nonstate public collective bargaining agreement" means the

- collective bargaining agreement in effect between any collective bargaining agent of any nonstate public employees and their employer.
- 22 (7) "Small employer" means any person, firm, corporation, limited 23 liability company, partnership or association actively engaged in 24 business or self-employed for at least three consecutive months who, 25 on at least fifty per cent of its working days during the preceding 26 twelve months, employed no more than fifty eligible employees, as 27 described in subsection (b) of this section, the majority of whom were 28 employed within this state. "Small employer" does not include any 29 nonstate public employer.
- 30 (8) "Nonprofit employer" means a nonprofit corporation, as 31 described in section 33-1002 of the general statutes. Nonprofit 32 employer does not include a nonstate public employer.
- 33 (9) "State employee plan" or "plan" means the plan offered to state 34 employees and retirees pursuant to section 5-259 of the general 35 statutes.
  - (10) "Health Care Costs Containment Committee" means the committee established pursuant to the ratified agreement between the state and state employees' Bargaining Agent Coalition pursuant to subsection (f) of section 5-278 of the general statutes.
- 40 (b) For purposes of sections 1 to 8, inclusive, of this act, "eligible 41 employees" does not include employees covered through the employer 42 by health insurance plans or insurance arrangements issued to or in 43 accordance with a trust established pursuant to collective bargaining 44 subject to the federal Labor Management Relations Act. In determining 45 the number of eligible employees, companies which are affiliates, as 46 defined in section 33-840 of the general statutes, or which are eligible 47 to file a combined tax return under chapter 208 of the general statutes 48 shall be considered one employer.
- 49 Sec. 2. (NEW) (Effective January 1, 2009) (a) Notwithstanding any

37

38

50 provision of title 38a of the general statutes, the Comptroller shall offer 51 coverage under the state employee plan to nonstate public employees, 52 municipal-related employees, employees of small employers and 53 employees of nonprofit employers and shall pool such employees with 54 the state employee plan for experience rating purposes. Premium 55 payments for such coverage shall be remitted by the employer to the 56 Comptroller and shall be the same as those paid by the state, except as 57 otherwise provided in this section or section 4 of this act. The 58 Comptroller shall offer participation in such plan for no shorter than 59 three-year intervals and at the end of any interval, an employer may 60 apply for coverage for an additional interval.

- 61 (b) Nonstate public employees may join the plan in accordance with 62 this subsection.
  - (1) Upon receipt of an application from an employer to cover, under the state employee plan, all employees of a municipality or all employees of a school board, or all employees of any other nonstate public employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application.
  - (2) Upon receipt of an application from an employer to cover, under the state employee plan, some employees of such employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application provided such coverage may be delayed by the Comptroller until all employees of the employer are seeking coverage, to the extent that the Health Care Costs Containment Committee certifies to the Comptroller that the delay is necessary to prevent a nonstate public employer from shifting a significantly disproportional part of its medical risks to the state employee plan.
  - (c) Employees of small employers may join the plan in accordance with this subsection.
- 81 (1) Premium rates for small employers shall be the total premium

63

64 65

66

67

68

69

70

71

72

73

74

75

76

77

78

79

- rate paid by the state and a state employee for a particular health care product offered by the Comptroller, except that an insurance carrier may adjust such rates to reflect one or more of the characteristics identified in subparagraph (A) of subdivision (5) of section 38a-567 of the general statutes.
  - (2) Upon receipt of an application from an employer to cover, under the state employee plan, all employees of such a small employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application.
  - (3) Upon receipt of an application from an employer to cover, under the state employee plan, some employees of such an employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application provided such coverage may be delayed by the Comptroller until all employees of the employer are seeking coverage, to the extent that the Health Care Costs Containment Committee certifies to the Comptroller that the delay is necessary to prevent the employer from shifting a significantly disproportional part of its medical risks to the state employee plan.
  - (d) Employees of municipal-related employers, which are not small employers, and the employees of nonprofit employers, which are not small employers, may join the plan in accordance with this subsection.
  - (1) Upon receipt of an application from an employer to cover, under the state employee plan, all employees of such an employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application.
  - (2) Upon receipt of an application from an employer to cover, under the state employee plan, some employees of such an employer, the Comptroller shall provide such coverage no later than the first day of the second calendar month following such application provided such coverage may be delayed by the Comptroller until all employees of the employer are seeking coverage, to the extent that the Health Care Costs Containment Committee certifies to the Comptroller that the

88 89

90

91

92

93

94

95

96

97

98

99

100

101

102

103

104

105

106

107

108

109

110

111

112

- delay is necessary to prevent the employer from shifting a significantly disproportional part of its medical risks to the state employee plan.
- 116 (e) The decision by individual employees to accept or decline 117 coverage for themselves or their dependents shall have no impact on 118 whether, and on what terms, coverage is available to employers under 119 this section.
- (f) Notwithstanding any provision of the general statutes, the state employee plan shall not be deemed (1) an unauthorized insurer, or (2) a multiple employer welfare arrangement. Any licensed insurer in this state may conduct business with the state employee plan.
- Sec. 3. (NEW) (*Effective January 1, 2009*) (a) Employers eligible, pursuant to sections 1 to 8, inclusive, of this act, to seek coverage for their employees under the state employee plan may seek such coverage for their retirees in accordance with this section.
- 128 (b) Upon receipt of an application to cover, under the state 129 employee plan, such retirees, the Comptroller shall provide such 130 coverage no later than the first day of the second calendar month 131 following such application, provided such coverage may be denied by 132 the Comptroller to the extent that the Health Care Costs Containment 133 Committee certifies to the Comptroller that the denial is necessary to 134 prevent the employer from shifting a significantly disproportional part 135 of its medical risks to the state employee plan.
  - Sec. 4. (NEW) (*Effective January 1, 2009*) (a) Each employer shall pay monthly the amount determined by the Comptroller pursuant to this section for coverage of its employees under the state employee plan. An employer may require each covered employee to contribute a portion of the cost of such employee's coverage under the plan, subject to any collective bargaining obligation applicable to such employer. If any payment due under this subsection is not paid two months after the date due, interest shall be added to such payment at the prevailing rate of interest, as determined by the Comptroller. Such interest shall be paid by the employer.

138

139

140

141

142

143

144

- 146 (b) There is established, within the General Fund, a separate, 147 nonlapsing account to be known as the state plan premium account. 148 All premiums paid by employers and employees pursuant to sections 149 1 to 8, inclusive, of this act shall be deposited into said account. The 150 account shall be administered by the Comptroller, in conjunction with the Health Care Costs Containment Committee, for payment of 152 insurance premiums.
  - (c) In the event a municipal employer fails to make premium payments for ninety days, the Comptroller may direct the State Treasurer, or any other officer of the state that is the custodian of any moneys made available by reason of any grant, allocation or appropriation by the state or agencies thereof payable to a municipality at any time subsequent to the failure of such municipality, to pay such premiums and interest to withhold the payment of such moneys in accordance with this subsection. Such moneys shall be withheld until the amount of the premium or interest then due and unpaid has been paid to the state, or until the Treasurer or such officers determine that arrangements, satisfactory to the Treasurer, have been made for the payment of such premium and interest, except that such moneys shall not be withheld if such withholding will adversely affect the receipt of any federal grant or aid in connection with such moneys. In the event that a municipal-related employer, small employer or nonprofit employer fails to make premium payments for ninety days, the Comptroller may terminate employee participation in the state employee plan and request the Attorney General to recover any premium and interest costs.
  - Sec. 5. (NEW) (Effective January 1, 2009) The Office of the Healthcare Advocate, working with the advice and consent of the Health Care Costs Containment Committee, shall employ ombudspersons for the purpose of advising any eligible employer and any collective bargaining agent of any eligible employers as to the advantages or disadvantages to the employer and its employees of procuring coverage under the state employee plan.

153

154

155

156

157

158

159

160

161

162

163

164

165

166

167

168

169

170

171

172

173

174

175

176

177

Sec. 6. (NEW) (*Effective from passage*) No coverage under the state employee plan shall be offered to any additional employees made eligible for coverage under sections 1 to 8, inclusive, until the State Employees' Bargaining Agent Coalition has provided its consent to the clerks of both houses of the General Assembly.

Sec. 7. (NEW) (Effective January 1, 2009) No later than January 1, 2010, the Comptroller, shall report to the General Assembly, in accordance with section 11-4a of the general statutes, recommendations for the terms and conditions under which access to the state employee plan may be provided to those not authorized access pursuant to sections 1 to 8, inclusive, of this act.

Sec. 8. (NEW) (Effective from passage) (a) There is established a Municipal Health Care Advisory Committee. The committee shall make advisory recommendations concerning health care coverage of municipal employees to the Health Care Costs Containment Committee. The committee shall consist of participating municipal employers and employees and shall include the following members appointed by a method to be determined by the Comptroller: (1) Three municipal employer representatives, one of whom represents towns with populations of one hundred thousand or more, one of whom represents towns with populations of at least fifty thousand but under one hundred thousand, and one of whom represents towns with populations under fifty thousand; (2) three municipal employee representatives, one of whom represents employees in towns with populations of one hundred thousand or more, one of whom represents employees in towns with populations of at least fifty thousand but under one hundred thousand, and one of whom represents employees in towns with populations under fifty thousand; (3) three board of education employers, one of whom represents towns with populations of one hundred thousand or more, one of whom represents towns with populations of at least fifty thousand but under one hundred thousand, and one of whom represents towns with populations under fifty thousand; (4) three board of education employee representatives, one of whom represents towns with

184

185

186

187

188

189

190

191

192

193

194

195

196

197

198

199

200

201

202

203

204

205

206

207

208

209

210

211

213 populations of one hundred thousand or more, one of whom 214 represents towns with populations at least fifty thousand but under 215 one hundred thousand and one of whom represents towns with 216 populations under one hundred thousand; and (5) one neutral 217 chairperson, who shall be a member of the National Academy of 218 Arbitrators or an arbitrator authorized by the American Arbitration 219 Association or the Federal Mediation and Conciliation Service to serve 220 as a neutral arbitrator in labor relations cases.

(b) There is established a Private Sector Health Care Advisory Committee. The committee shall make advisory recommendations concerning health care coverage of employees to the Health Care Costs Containment Committee, as defined in section 1 of this act. The committee shall consist of the following members appointed by a method to be determined by the Comptroller: (1) Five private sector employer representatives; (2) five private sector employee representatives; and (3) one neutral chairperson, who shall be a member of the National Academy of Arbitrators or an arbitrator authorized by the American Arbitration Association or the Federal Mediation and Conciliation Service to serve as a neutral arbitrator in labor relations cases.

This act shall take effect as follows and shall amend the following sections:			
Section 1	from passage	New section	
Sec. 2	January 1, 2009	New section	
Sec. 3	January 1, 2009	New section	
Sec. 4	January 1, 2009	New section	
Sec. 5	January 1, 2009	New section	
Sec. 6	from passage	New section	
Sec. 7	January 1, 2009	New section	
Sec. 8	from passage	New section	

LAB Joint Favorable Subst. C/R

**APP** 

221

222

223

224

225

226

227

228

229

230

231